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August 6, 2007

TO.

FROM: Douglas P. Mueller

Examiner: Unknown

Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

OUR REF: 10873.1710USWO

TELEPHONE: (612) 455,3800

Total pages, including cover letter:

PTO FAX NUMBER: 571.273.8300

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Title of Document:

Supplemental Information Disclosure Statement, Form 1449,

1 reference, European Search Report

Applicant: MURAKAMI et al. Scrial No.: App. Filed:

10/551,500 September 30, 2005

Group Art No.: 2827 Conf. No.: 4716

Please charge any additional fees or credit overpayment to Deposit Account No. 50-9478. Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

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Antonette C. Peters

Signature

Date

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

MURAKAMI et al. Conf No: 4716 Applicant: 2827

Group Art Unit: 10/551,500 Serial No.:

September 30, 2005 10873.1710USWO Filed: Docket:

MEMORY CELL, MEMORY USING THE MEMORY CELL, MEMORY Title:

CELL MANUFACTURING METHOD, AND MEMORY RECORDING/READING METHOD

CERTIFICATE UNDER 37 CFR 1.6(d): 1 hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on

Name: Antonette Peters

## SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents

P.O. Box 1450 Alexandria, VA 22313-1450

Dear Commissioner:

With regard to the above-identified application, the items of information listed on the enclosed Form 1449 are brought to the attention of the Examiner. Copies of any foreign patent documents or "Other Documents" are transmitted herewith.

In accordance with the provisions of 37 C.F.R. §1.97, this statement is being filed (CHECK ONE):

ZI.	Action on the merits, or before the mailing date of a First Office Action on the merits
	after the filing of a request for continued examination under 37 C.F.R. §1.114; or
_	

(2) after the period defined in (1) but before the mailing date of a Final Rejection or Notice of Allowance, and

the requisite Statement is below, OR

the requisite fee of \$180.00 under Rule 1.17(p) is included herein, or

(3) after the mailing date of a Final Rejection or Notice of Allowance but on or before the payment of the Issue Fee, AND the requisite Statement is below AND the requisite fee of \$180.00 under Rule 1.17(p) is included herein.

## STATEMENT

Applicants hereby state that:

Each item of information contained in the Information Disclosure Statement was first cited in a communication from a foreign patent office in a counterpart

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application or by the USI prior to the filing date of	PTO in a related appl the Information Disc	ication not more than thre losure Statement	e months		
If this box is checked, Applicant pr	ovides the following:				
Certification	n Under 37 C.F.R. §	1.704(d)			
In accordance with 37 C.F.R. §1.70 listed on the enclosed Form 1449 was fit office in a counterpart application, and the individual designated in 37 C.F.R. §1.56 Information Disclosure Statement.	rst cited in a commun hat this communication	ication from a foreign p on was not received b	patent by any		
The Examiner is hereby advised of each U.S. patent application publication enclosed.					
Application No. Fili	ng Date	Group			
No representation is made that a reference is "prior atr" within the meaning of 35 U.S.C. §§ 102 and 103 and Applicants reserve the right pursuant to 37 C.F.R. § 1.131 or otherwise, to establish that the reference(s) are not "prior atr." Moreover, Applicants do not represent that a reference has been thoroughly reviewed or that any relevance of any portion of a reference is intended.  Consideration of the items listed is respectfully requested. Pursuant to the provisions of M.P.E.P. 609, it is requested that the Examiner return a copy of the attached Form 1449, marked as being considered and initialed by the Examiner, to the undersigned with the next official communication.					
FEE	AUTHORIZATION	<del>4</del>			
Should any fee associated with the check, the Commissioner is authorized to 3478. Any overpayments should be created as the commissioner is authorized to the check of the che	o charge the missing	fee to our Deposit Accoun			
	Respectfully submi	tted,			
53148 PALIFICITIANSONANS OFFICE  Dated: August 6, 2007  DPM:acp	HAMRE, SCHUM. P.C. Post Office Box 29 Minneapolis, MA (612) 455-3800  By: Douslas P. Mr. Reg. No. 30,30	ueller	RSON,		

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Date Mailed: August 6, 2007		Sheet 1 of 1
FORM 1449*	Docket Number:	Application Number:

FORM 1449* SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT	Docket Number:   Application Number:   10873.1710USWO   10/551,500			
IN AN APPLICATION	Applicant: MURAKAMI et al.			
(Use several shoots if necessary)	Filing Date: September 30, 2005	Group Art Unit: 2827		

			U.S. PATENT DOCUM				
EXAMINER INITIAL	DOCUMENT NO.	DATE	NAME	CLASS	SUBCLASS	FILING IF APPRO	DATE PRIATE
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	DOCUMENT NO.	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
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7C.Y./	European	Scarch Report	from the corresponding EP	04 72 4761, mail	led May 7, 2007.		

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EXAMINER	/Connie Yoha/	DATE CONSIDERED 02/19/2008				
EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; draw line through citation if not in conformance						

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<sup>\*</sup>Substitute Disclosure Statement Form (PTO-1449)